

**The Responsible Gun Owner's
GUIDE TO TREATING
GUNSHOT WOUNDS
& OTHER TRAUMATIC INJURIES**

PRIMARY ASSESSMENT

Mechanism of Injury (MOI): This refers to what caused the injury and how traumatic the injury might be.

Example: Think of what type of injuries could result from a bullet penetrating the human body.

Remember:

- Take Charge – Direct the situation.
- Call 911 – Get EMS on the way
- Remain Calm
- Keep Thinking

Conduct Your Primary Assessment:

- Check Level of Consciousness – Ask, “Are you OK?”
- Check Breathing – Look, listen and feel for breath sounds.
- Check Circulation – Check pulse for six seconds
 - Adult Normal: 60-100BPM
 - Child Normal: 80-120 BPM
- Check for Deformity – Look for any obvious deformities
- Check Arms and legs

Look for any Major Bleeding:

- Conduct a Blood Sweep – Start at the head and work your way down to the toes
- Face the Patient – Pay attention to any facial expressions of pain.
- Only Expose the Patient as Necessary
- Perform Primary Assessment – Should take on to two minutes.

Remember: “Stop the bleeding and start the breathing.”

SECONDARY ASSESSMENT

Goal: Re-evaluate the patient, starting at his or her head and working your way down to his or her feet.

Conduct Detailed Evaluation of the Patient – Take care of the primary injury or the most life-threatening injury first. Look for secondary injuries. Bandage or splint as necessary.

Take Notes of What You Find, if Possible –

Name / Age / cause of Injury (if known) / Any medications

Check for Head Injury – If the patient sustained (or you suspect) a head injury, DO NOT give him or her anything to eat or drink.

Prepare the Patient to be Moved if Needed – Remember, try not to cause further injury. Your situation will dictate your decision.

TYPE OF BLEEDING

Arterial – Bright Red, Spurting

- This usually indicates a life-threatening injury.
- Apply a tourniquet:
- The tourniquet should be 4 to 6 inches above the wound, never on the wound or joint.
- Apply the tourniquet only to extremities (i.e. arms and legs).
- Never remove the tourniquet after it is applied
- If possible, mark the forehead with a “T” and include the date and time.
- Use whatever is available: a pen, blood, mud, lipstick, etc.

Venous – Dark Red, Steady Flow

- This usually indicates a non-life threatening injury.
- Apply direct pressure on the wound.
- Apply pressure dressing/
- Evaluate the body part approximately 6 inches above the heart.
- If a deep vein is cut, expect massive bleeding like with arterial bleeding.

(NOTE: This is life-threatening. Apply a tourniquet.)

Capillary – Dark Red, Oozing

- This usually indicates a non-life-threatening injury.
- Apply direct pressure.
- Apply pressure dressing.
- This type of bleeding will normally stop on its own.

STEPS TO STOP BLEEDING

1. Direct Pressure
2. Elevation
3. Pressure Point
4. Tourniquet

(Note: if the bleeding is severe or life-threatening, skip the steps above and apply a tourniquet immediately.)

Rapid blood loss of 1 quart or more can lead to shock and/or death.
A child who loses 1 pint of blood can be in extreme danger.

BANDAGING AND SPLINTING

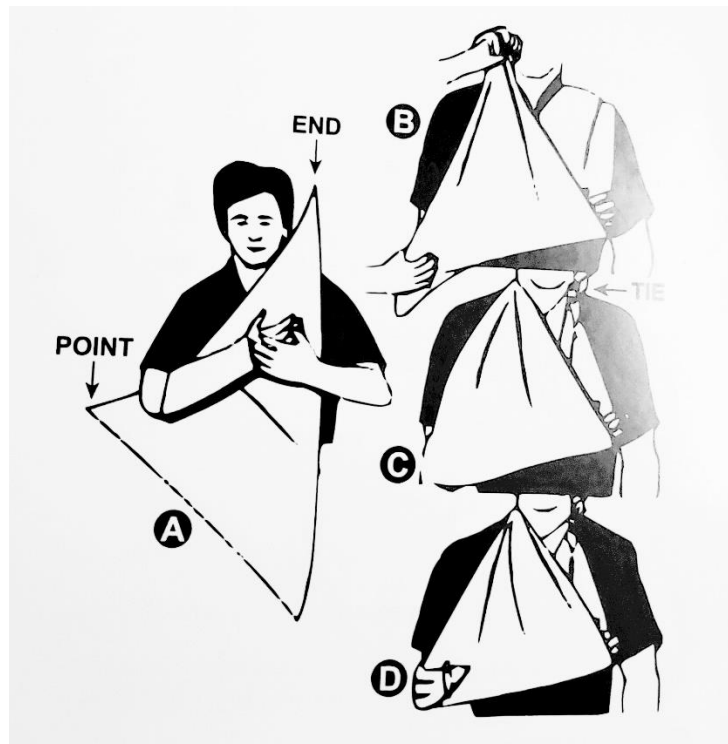
Remember:

- Apply bandages firmly but not too tightly.
- Check distal pulse.
- Check capillary refill at finger tips. (Refill should occur within a second.)

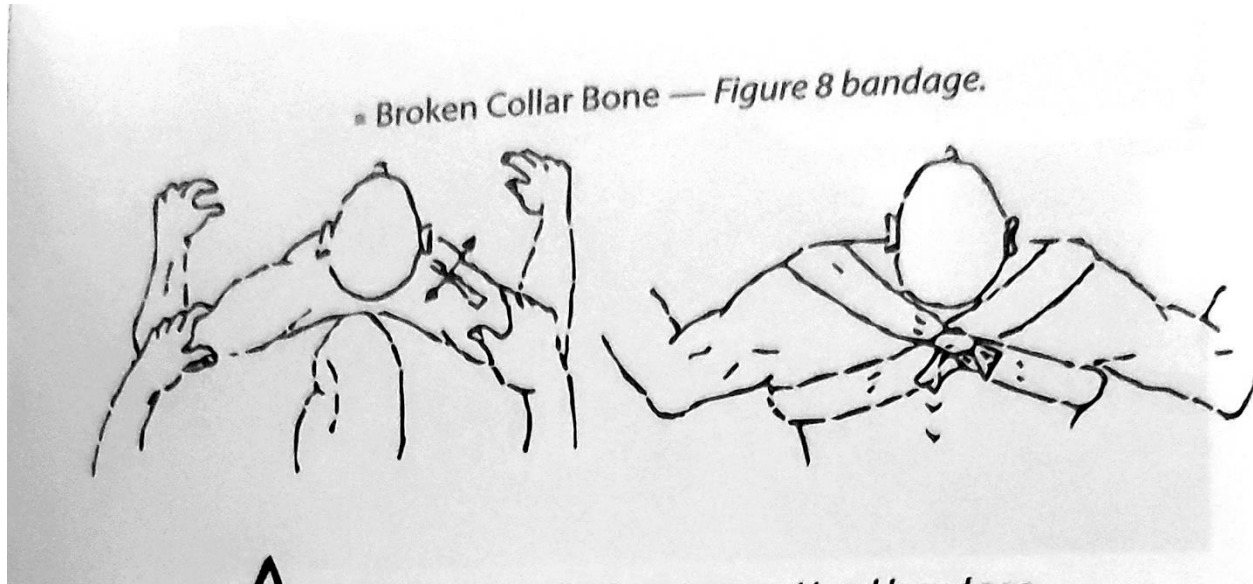
CRAVAT/TRIANGULAR BANDAGING

Used for:

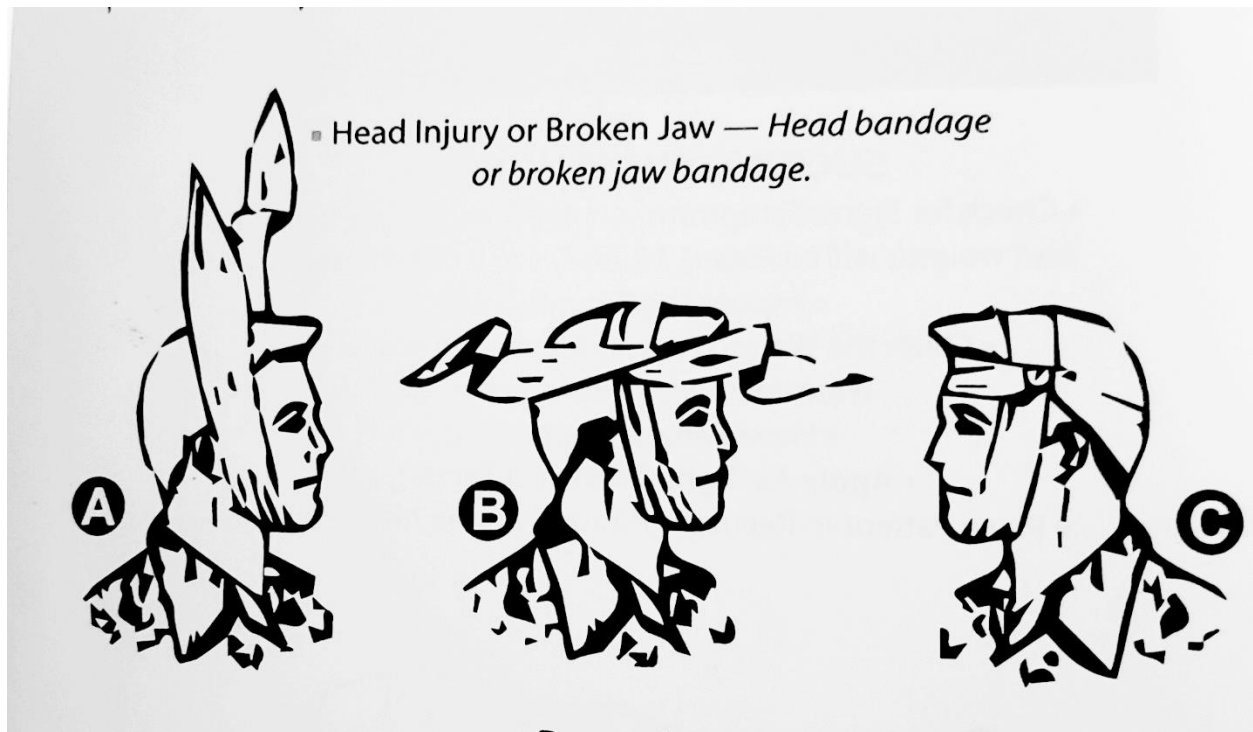
Broken or Sprained limbs – Sling and swathe, Wrap a send cravat around the affected arm in the sling.



Broken Collar Bone – Figure 8 Bandage.



Head Injury or Broken Jaw – Head bandage or broken jaw bandage.



Remember:

There are many different types of bandages available on the open market. Most come with directions on how to apply. It is highly recommended that you purchase one for practice and one for emergencies.

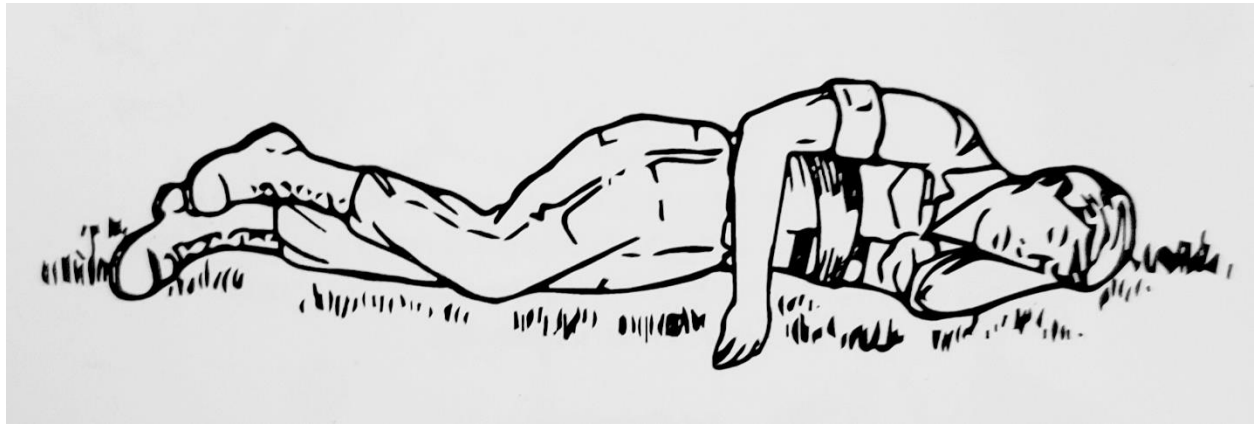
Be Creative:

You might not have all the perfect emergency medical gear available, but you can improvise and adapt to your situation.

(Note: Practice applying the cravat bandage along with the video.)

SUCKING CHEST WOUND

- Check for Signs/Symptoms – Look for entry/exit wounds (exit wounds will be larger), Bluish lips or labored breathing.
- Expose the Wound Area
- Clean the Wound Area as Much as Possible – Wipe away any sweat and blood.
- Have Patient Breathe Out
- Apply Air–Tight Chest Seal Bandage
- Place Patient in Recovery Position on the Affected Side



Remember:

If EMS is more than an hour away, you might have to burp the wound to release air from the chest cavity. Lift the chest seal bandage as the patient breathes out and re-seal.

BEING MENTALLY, EMOTIONALLY AND PHYSICALLY READY

It is highly recommended you prepare yourself ahead of time for the challenges you could face during a defensive situation. You just stopped a life-threatening attack, and you could have been injured during it.

Here are a few specific challenges to keep in mind:

Remain Calm and Control Your Emotions:

You might have to continue the fight. You might even have to bandage yourself so you can keep fighting.

Don't Stop Thinking:

Your mind is a powerful tool. You must have the will to survive!

Don't Stop Fighting!**Develop Your Medical Plan:**

What type of injuries could you face? What medical equipment will you need? What medical equipment would be nice to have?

What training do you need to build that skill?

Fine-Tune Your Medical Plan:

Does it work? Do you have the right gear?

YOUR MEDICAL KIT

There are many available options for pre-made medical gear. You can invest your money on quality gear or you can design your own medical kit using the knowledge and skills you gained from this video. On the next page is a general list to get you started. You can always take away or add to your kit based on your lifestyle and your needs.

It is impossible to anticipate and have all the right equipment for every medical emergency. So, as you develop your medical plan, think about:

The types of injuries you could face during the activities you enjoy

The communications equipment you might need – Cell phone radio, satellite phone, etc.

The types of medical gear you might need.

The ease of transportation of your medical gear.

MED KIT CHECKLIST

This is a recommendation for general medical equipment to start building your own personal kit. Again, you can add other equipment as required for your activity.

- Large nitrile gloves (two pairs)
- Trauma shears or knife
- CPR mask
- Tourniquet (TK-4, CAT, SWAT T, SOF-T, Cravat or Belt)
- 4x4 gauze or compressed gauze
- ACE bandages
- Chest seal (petroleum gauze with plastic. Bolin Chest Seal, Asherman or HALO)
- 3 feet of duct tape or surgical tape
- Adhesive bandages (various sizes)
- Black Sharpie marker

(NOTE: Ensure your kit is waterproofed.)

QUICK-REFERENCE CHART

Name: _____

Age: _____ Sex: M / F

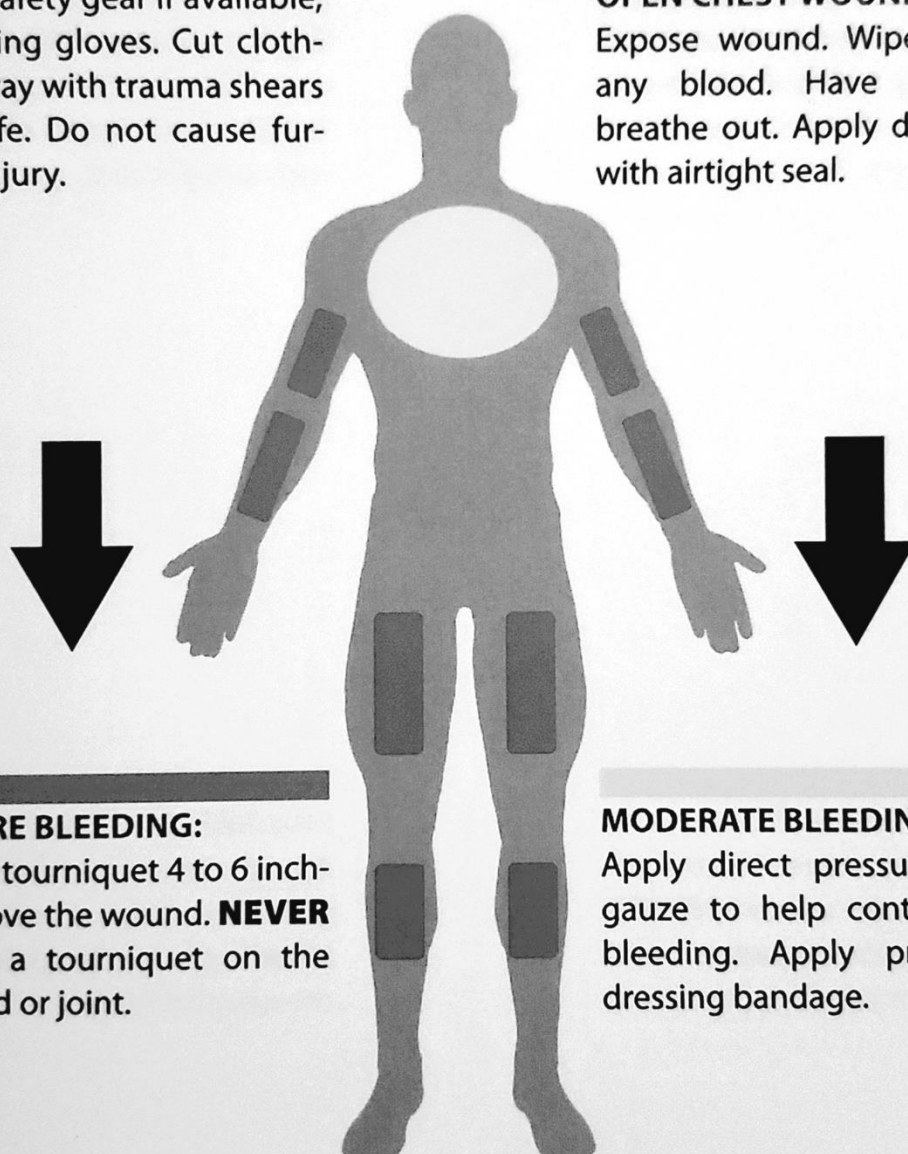
Injury: _____

STEP 1:

Wear safety gear if available, including gloves. Cut clothing away with trauma shears or knife. Do not cause further injury.

OPEN CHEST WOUND:

Expose wound. Wipe away any blood. Have patient breathe out. Apply dressing with airtight seal.



SEVERE BLEEDING:

Apply tourniquet 4 to 6 inches above the wound. **NEVER** apply a tourniquet on the wound or joint.

MODERATE BLEEDING:

Apply direct pressure. Use gauze to help control the bleeding. Apply pressure-dressing bandage.